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### CLINICS.

#### *Clinical Lecture on Disorders occasioned by the Development of the Dens Sapientiae.*

Delivered at the Hospital of La Charité, by Professor VELPEAU.

Gentlemen,—As we have now in hospital an example of the disorders which are occasionally produced by irregular development of the wisdom tooth, I shall avail myself of the opportunity to direct your attention to a subject which has, hitherto, been too much neglected by medical men.

The patient to whom I allude is a strong, healthy young man; for the last few weeks he has complained of severe pain in the right side of the face and mouth, attended with so much swelling of the parts, that he is unable to open his mouth; the submaxillary glands are also considerably tumefied and painful. As it was impossible to ascertain the condition of the interior of the mouth, I endeavoured to subdue the inflammatory symptoms, by applying leeches near the angle of the jaw, poultices, &c.

As soon as I could depress the lower jaw a little, I passed a small wooden wedge between the molar teeth, and, by gradually

increasing its size, was enabled to obtain a view of the interior of the mouth. The cause of the disease was at once manifest. Behind the fourth inferior molar tooth there was a large fungous ulcer, covered with vegetations, in the midst of which we could distinguish, by means of the probe, a hard body, probably the *dens sapientiae*. I divided the fungous growth freely with a bistoury, and completely exposed the tooth. On the following day the pain had entirely disappeared; the tumefaction gradually subsided: alum gargles were now used, and in a very short time the patient was completely cured.

The disorders occasioned, gentlemen, by the development of the wisdom tooth, were but little known before the interesting memoir of M. Toirac, on this subject, was published; they may occur in connection with the superior or inferior tooth, but they usually accompany irregular development of the *inferior* one, and are then more severe and better marked.

The wisdom tooth should appear between the ages of eighteen and twenty-five years; but it often comes forth later, and in some cases at a very advanced period of life. M. Toirac saw the skull of a woman, who died at

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the age of 103; all the alveolar cavities were obliterated, but on one side of the lower jaw there was a wisdom tooth which was on the point of appearing. The idea of a third dentition has arisen, no doubt, from facts of this kind. The development of the lower wisdom tooth may occasion certain disorders, when there is not sufficient space for it between the last molar and base of the coronoid process; or when, with sufficient space, the direction of the tooth is vicious; this latter may occur in several ways; 1st, it may grow obliquely forwards, and press against the neighbouring molar tooth; 2d, or inwards, impeding the movements of the tongue, and causing excoriation, &c.; 3d, or outwards, the crown of the tooth being sometimes lodged in the parietes of the cheek; 4th, sometimes it gets locked in the base of the coronoid process; and 5th, it may be covered and impeded by the gum, as was the case of the patient mentioned at the commencement of the lecture.

It were easy to increase the number of irregular directions which the tooth may take; but they may all be reduced to the five species just described; I shall therefore proceed to give you an example of each.

*CASE I.—Direction of the dens sapientiae from behind forwards; arrest of the tooth by the neighbouring molar; extraction of this latter; cure.*

Madame R—, a young woman 22 years of age, began to feel, three or four months after marriage, a dull pain about the angle of the lower jaw, on the left side. The pain soon extended to all the teeth on that side, but was distinct from toothache. As the pain continued to increase in intensity during several months, the existence of rheumatism was suspected, and various modes of treatment employed, but without the slightest benefit. Opiates, blisters, steaming the part, &c., were tried next, but afforded no relief; a seton was then placed in the back of the neck, and kept open for a month; this also was unavailing. The patient now took sulphate of quinine, Meglin pills, tried acupuncture, and was finally sent to a watering town, after a consultation of physicians had been held on her case. She returned to Paris in the same state of suffering as when she left it, and called upon me; the teeth were carefully examined, but they were all white, well formed, and apparently sound; the gums were, at every point, pale and free from any affection; nothing denoted the ap-

proaching eruption of a wisdom tooth. I resolved, however, on ascertaining the condition of this latter, and divided the gum over it freely; on passing a small probe, I at once discovered that the dens sapientiae was directed forwards, and arrested in its growth by the second molar; I therefore extracted this latter tooth next day, and within a week the lady was completely relieved of the torments which had reduced her to the most miserable condition. I had occasion to mention this case to M. Esquirol, and he informed me that a lady who had been brought to his institution labouring under mental derangement, was restored to reason by a crucial division of the gum, which liberated the wisdom tooth.

In order to understand the way in which disorders are produced by the dens sapientiae, you should remember that, when the crown of the tooth appears at the edge of the gum, the root is far from having acquired its maximum degree of development; the point of the fang is still in a pulpy state, and as it gradually grows, the crown advances; in fact, the root of a tooth never descends, as the term might imply, but development takes place from within outwards; hence, should the crown of the tooth encounter any obstacle, the root is necessarily forced inwards during the progress of ossification, and more or less pressure is effected on the nervous and highly sensitive tissues which compose the dental pulp. Upon this principle, gentlemen, you can readily conceive the disorders which may arise when one of the wisdom teeth becomes locked in the base of the coronoid process, or is arrested in its growth by any obstacle, such as the gum, neighbouring molar tooth, &c.

*CASE II.—Wisdom tooth projecting inwards, and producing ulceration of the tongue, resembling syphilitic ulcer.*

M. M., an artillery officer, 45 years of age, who had resided in the country since 1815, came to Paris to be treated for an old syphilitic affection, which he conceived to have been imperfectly cured. For several months he had suffered from an ulcer on the left side of the tongue, near its root; great pain was occasioned by the motion of the tongue during mastication. One of the first medical men in Paris ordered a course of mercury for him, but this remedy only aggravated the disease; and in the course of a fortnight the tongue was so swollen as to fill the whole cavity of the mouth. The gums

were highly congested; the breath fetid, and the teeth loose. The mercurial treatment was now suspended, and the mouth soon presented the same condition as when M. first arrived at Paris.

On examining the tongue with care, I perceived at its root a sore, which bore considerable resemblance to a venereal ulcer; but as the patient's stomach was rendered sick by every attempt to examine the back of the mouth, our investigations were very imperfect. At length, however, I succeeded in discovering, about half an inch from the orifice of the dental canal, a hard body, completely concealed by a portion of the gum, and below this another hard body, which turned out to be the crown of the wisdom tooth, directed inwards towards the tongue. An attempt was made to extract the latter, but it broke off, and the fang remained behind; enough, however, had been effected to free the tongue, and in a few days the patient was completely cured.

This case, gentlemen, shows that from want of sufficient and careful examination, which we are, doubtless, to attribute to the irritable state of the patient, he was unnecessarily submitted to a course of mercury, which not only aggravated the disease, but injured his general health.

*CASE III.—Wisdom tooth projecting outwards, and lodging itself in the parietes of the cheek.*

Adelaide René, twenty-nine years of age, consulted me on the 23d of October, 1834, for a swelling of the right side of the face, with which she had been affected for several months. On the external surface of the cheek, at a point corresponding to the wisdom tooth, could be felt a hard and very painful tumour. On introducing the finger into the mouth, the cause of the disease was readily discovered; the wisdom tooth projected horizontally outwards, and its crown was lodged in the walls of the cheek. The extraction of the tooth would have remedied the complaint at once; but the neighbouring soft parts were too much inflamed, and the tooth itself was so decayed that it must have broken to pieces under the instrument. A small bit of hollowed cork was, therefore, introduced between the tooth and the cheek, and the inflammatory symptoms combated by appropriate means. Within forty-eight hours they were sufficiently subdued to permit the girl to open her mouth, and the tooth was extracted.

Deviations of this kind are very common, but they are seldom carried to the extent seen in the present case; the tooth generally inclines a little outwards, and does not produce any inconvenience until it becomes decayed, when the asperities of the crown excite ulceration in the surrounding parts.

*CASE IV.—Wisdom tooth arrested in its development by the base of the coronoid process.*

J. Boulanger consulted me on the 18th of October, 1825. The right cheek was swollen in the most extraordinary degree: the tumefaction extended from the eyelids to the clavicle; the face and neck presented the traces of several cicatrices arising from abscesses which had formed at various times. For the last twenty months the patient was unable to open his mouth, and his nourishment consisted in light broths, conveyed through an opening left by the absence of a small upper molar tooth; at about three inches from the angle of the jaw there was a fistulous opening which discharged a great quantity of purulent matter; and another one, lower down in the neck: on passing a probe into the first of these fistulous openings, it penetrated obliquely backwards for about three inches, and was then stopped by a hard body, which I suspected to be the *dens sapientiae*. The health of the poor man had suffered very much; he was extremely thin, and complained of frequent colic, attended with diarrhoea; his digestive functions were also much deranged. Every means had been tried, but without success, to open the mouth so as to admit of extracting the tooth; I therefore endeavoured to force the jaw open by gradually introducing between the teeth portions of wood and cork; this had the desired effect, although the process was very tedious; the tooth was extracted, and in five or six days afterwards a sequestrum was discharged, which appeared to belong to the coronoid process; it bore the mark of the crown of the tooth, and thus indicated the obstacle which had opposed the development of the tooth. The second molar was now extracted; eight days afterwards a second portion of bone was removed, and from this time the tumefaction of the face and neck disappeared so rapidly, that at the end of twenty days the face had resumed its natural size and appearance.

This, gentlemen, is a very striking case; but occasionally we do not find it so easy a matter to disperse the swelling, particularly

if it be of long standing; in such cases we must have recourse to pressure, which has a great effect in removing the tumefaction. Sometimes the disorders occasioned by a wisdom tooth are still more severe than any that we have as yet described; the following is an example.

CASE V.—M. J., a gentleman about fifty years of age, had suffered excessive torture during the last two years. When I first saw him, the right side of the face was greatly swollen, and disfigured by numerous scars from old abscesses; the neck also was swollen down to the clavicle, and marked in a similar manner; the mouth remained half open and was distorted, the lower teeth not corresponding in range with the upper. The general health of the patient had been considerably affected by his sufferings; for the last four months he laboured under constant diarrhoea; fetid saliva, mixed with pus, flowed continually from his mouth, and his breath had become so horrible, that he was unable to inhabit the same room with his wife and children. He had passed several months in a *maison de Santé*, but without benefit. It was in this state that I first saw him, feeble, emaciated, and unable to walk without the support of two friends. A mass of fungous flesh which occupied the whole of the mouth on the diseased side was freely divided, and, after a long examination, a wisdom tooth was discovered in the base of the coronoid process. The tooth and whole of the process were removed; as were also several portions of the maxillary bone, with loose teeth, &c. The after-treatment consisted merely in the use of detergent gargles, and it was astonishing to see how rapidly the patient recovered his health and strength. Within a fortnight all bad symptoms had disappeared, and nothing remained but the deviation of the mouth, which was finally overcome by means of a bandage.

CASE VI.—*Chronic inflammation of the amygdala produced and kept up by irregular growth of the wisdom tooth.*

Dr. Friard, while pursuing his medical studies, was attacked, in the summer of 1821, with pain in the throat, and in the following November with severe inflammation of the right tonsil. This condition was partly subdued by antiphlogistic measures, but the pain, &c., soon returned, and continued, in spite of every means, up to the year 1823. The teeth and gums appeared to be perfectly healthy, and a surgeon was

about to extirpate the tonsil, when it was accidentally discovered that the wisdom tooth on the affected side had not yet made its appearance; the gum was now freely divided, but the portions of divided gum became inflamed, and had to be removed with the knife and caustic. The tooth was thus completely freed, and the obstinate inflammation of the tonsil soon disappeared.

This, gentlemen, is the only effectual treatment whenever the wisdom tooth is bound down by an indurated portion of gum: you must divide it freely by a deep incision, and it will be right to introduce a small plug of lint between the edges of the wound; the patient may complain of pain, but he must submit, for this is often essential to the success of the operation.—*Prov. Med. and Surg. Journ.*

#### SKETCHES AND ILLUSTRATIONS OF MEDICAL DELUSIONS.

*Mesmeric Infirmary.*—The following advertisement from the London “Times” newspaper, of July 14th last, shows the progress of the mesmeric humbug in England.

“MESMERIC INFIRMARY.—At a meeting held at the Earl of Ducie’s, No. 23 Belgrave-square, July 9th, this meeting, being convinced of the vast benefits derived from mesmerism in the cure of diseases, even the most intractable, as well as in the prevention of pain in surgical operations, and being desirous that its benefits should be more widely extended to the poorer classes than individual exertion can accomplish, it was resolved—

“1. That with this view a Mesmeric Infirmary shall be established, by voluntary contribution, for the application of mesmerism to the cure of diseases, and the prevention of pain in surgical operations.

“2. That this Infirmary shall be under the management of a president, vice-presidents, trustees, a treasurer, secretary, and committee.

“3. That the Right Hon. the Earl of Ducie be President.

“Vice-Presidents—Baron de Goldsmid, Viscount Morpeth, M. P., R. Monckton Milnes, M. P., J. H. Langston, M. P., the Rev. G. Sandby, jun., the Rev. T. Robertson. Treasurer—Mr. Briggs. Committee—Dr. Ashburner, Dr. Buxton, Dr. Elliotson; Mr. Clarke, Mr. Chandler, Mr. Flintoff, Mr. J. Hands, Mr. D. Hands, Mr. F. G. Johnston, Mr. Symes, surgeons; Major

Jackley, Captain James, Mr. Blyth, Mr. Fradelle, Mr. Kingdom, and Mr. Topham.

Then follows a lengthened list of subscriptions received, in which we find the Earl of Dacie, Baron de Goldsmid, and Mr. Langton to have subscribed 100*l.* each, Mr. Murray and Dr. Elliotson 50*l.* each, and many others who were present, donations, annual subscriptions, of 5*l.*, or as many guineas.

*Quack Advertising.*—It is said that the notorious Morrison expended between the years 1830 and 1844, the enormous sum of \$10,000 dollars in advertising his nostrum.

*Certificates of Medical Men to Quack Remedies.*—Certificates of medical men to unqualified, ignorant, or unprincipled persons respecting preparations which are either universal, secret, or the objects of patents, have already been severely condemned on many occasions in the pages of *The Lancet*. But the subject is so important in itself, and its ramifications are so extensive and injurious, that very much remains to be said and reasoned regarding it. We hope to see the day when every man will, from conscientious feelings, refrain from granting such certificates under any circumstances whatever, and when every one who desires well of his profession, will take the most energetic means to remove any suspicion of collusion with quacks and quackery. If this feeling could be actively aroused in the profession, we should no more see quacks adopt the names of medical men, and forge their certificates to the most destructive and abominable nostrums, nor have to witness otherwise respectable men making themselves ridiculous by testifying to the virtues or harmlessness of the most inconsiderable tonics. We smile at the obsolete power possessed by the ARCHBISHOP OF CANTERBURY, of making his footman or valet a doctor of medicine, irrespective of education, or any other claim to the honour; yet we tolerate the still more mischievous system by which professional men themselves make practitioners in medicine by the grant of certificates. But we hold that every certificate granted respecting medicinal talent or virtue to any extra-professional person or thing, goes as directly towards constituting the ignorant medical practitioners, as the most flagrant abuse of the power vested in the archbishop ever did or could. It is no

use mincing about terms or titles; the men we produce below—HOLLOWAY, HUNT, KIDDLE, NEWBERRY, DA SILVA, STIVENS, FRANKS, COCKLE, SMITH, RUSPINI, and the rest, are as much medical practitioners, engaged in obtaining money by prescribing medicines, or medical treatment, as Dr. CHAMBERS or Sir BENJAMIN BRODIE themselves. The more is the scandal that they should, any of them, be able to vaunt medical sanction of any kind to their, in many instances, nefarious proceedings.—*Lancet*, July 25, 1846.

## M E D I C A L   N E W S .

### DOMESTIC INTELLIGENCE.

*University of the City of New York—College of Physicians and Surgeons.*—We learn with pleasure, from the annual announcement of this school, that it is in a very prosperous condition. The number of students the past session was 219. Within the last eighteen months the college has received some valuable donations, among which are an anatomical cabinet of four hundred valuable preparations from Dr. J. K. Rodgers; and an extensive cabinet of *materia medica* by Dr. J. R. Beck.

*Medical Department of Hampden Sidney College, Richmond, Va.*—The number of students the past session was 74, of whom 17 received the degree of M. D. at the commencement in March last.

*Medical Society of the State of Tennessee.*—The 17th annual meeting of this society was held in Nashville on the 6th of May last. Dr. A. H. Buchanan was elected president, Dr. D. M'Phail vice-president, Dr. Martin treasurer, Dr. C. K. Winston corresponding-secretary, and Dr. J. W. Stout recording-secretary. Dr. J. E. Manlove was appointed orator for next year.

*Dictionary of Dental Science.*—Dr. CHAPIN A. HARRIS is engaged in preparing for publication a Dictionary of Dental Science, and with the hope of eliciting important information has issued a circular, proposing several queries, to which answers are requested.

*Baltimore College of Dental Surgery.*—From the seventh annual announcement we learn with pleasure that this institution is in

a prosperous state. A college building is now being erected, which will be ready, it is expected, the coming season.

#### FOREIGN INTELLIGENCE.

*Compound Fracture of the Skull—loss of a portion of Brain—Recovery.*—Mr. F. P. SMITH relates in the *Provincial Med. and Surg. Journ.*, July 29th, 1846, the following interesting example of this accident:

"Oct. 1st, 1845, I was sent for to visit Thomas Keeler, a high-spirited, unmanageable boy, four years old, who, I was informed, had been seriously injured by a wagon about an hour before. On my arrival at his father's house, a distance of three miles from my residence, I was told he had been playing under a wagon in the field, and on its being driven forwards, he had fallen with his head between the spokes of the hind wheel; he was carried round by the wheel, and his head was forced between one of the spokes and an iron bolt which projected from the side of the wagon, a space measuring not more than three inches and a half.

"On examining the head, I found a most frightful lacerated wound of the scalp, extending from the right temple across the forehead, and terminating in the left eyebrow; the frontal bone was laid completely bare, and the right superciliary ridge from its external to its internal angle, including a portion of the orbital plate, was torn up. On removing this, which laid loose in the wound, I found attached to it a portion of brain, of the size of the end of the little finger, and weighing about thirty grains; four other smaller portions of bone were also removed. After cleansing the wound, I brought the flaps together, retained them so by means of several sutures, leaving a depending opening at the outer angle. Lint, dipped in cold water, was kept constantly applied over all, including the eye, which appeared to have received irremediable injury. The little patient was placed in bed, an active purgative was given, and he was confined to a milk and water diet, which was continued for a fortnight. On the following day I found he had passed a tolerably quiet night; the medicine had acted freely, and in all respects he was very much better than I expected to find him.

"To be brief, the case progressed most favourably, without a single bad symptom; in three weeks the wound had healed, ex-

cepting a small opening at the outer angle; and at the end of six weeks he was playing about in his usual health. The sight of the right eye is gone and he is unable to raise the eyelid. After recovery, this boy exhibited the same restless and mischievous disposition as before the accident, which caused the loss of a portion of the cerebral substance."

*Mode of arresting Hemorrhage from extraction of a tooth.*—The editor of the *Lond. Med. Gaz.* states that he has known the most obstinate bleeding, following the extraction of a tooth and continuing for some hours, arrested by the use of the oil of turpentine on a pledget of lint, kept over the bleeding surface for a short time by moderate pressure.

*Combination of Carbonate of Iron with Sulphate of Quinine in Intermittent Fever.*—Prof. LIPPICH, of Padua, recommends the addition of the carbonate of iron to the sulphate of quinine in the treatment of periodical fevers. The following is his formula:

Carbonate of iron - - One gramme  
Sulphate of quinine - - One gramme  
Extract of taraxacum - q. s.

To be made into a mass of proper consistency and divided into thirty pills, two of which are to be taken every two hours. The carbonate of iron may be gradually increased to two grammes.—*Gaz. Méd. de Paris.*

*Coffee as a Remedy for Neuralgia.*—It is stated that a female under the care of M. Piorry had after parturition been attacked with a neuralgic affection of the frontal branch of the fifth pair of nerves, which, after resisting a number of the ordinary remedies, yielded completely to a continued use for many days of a very concentrated decoction of coffee.

Another case also is mentioned, in which the success of this remedy was generally marked. A woman affected with the same form of neuralgia, which had been unavailingly treated with the valerianate of zinc and quinine, became cured by combining the use of strong coffee with the above remedies. The therapeutic effects of this drug were well marked in her: a draught of a very strong decoction of it at the commencement of a paroxysm of pain being quite sufficient to prevent its continuance.—*Lond. Med. Gaz.*, from *Gaz. des Hôpitaux*.

*Foreign Body in the Larynx.*—M. VOGEL-VANGER was called on the 29th February, 1840, to a little girl between five and six years of age, who was attacked with fits of intense suffocation. He was informed that the child, whilst playing near its mother, who was occupied in scraping some carrots, had seized a piece of this root, cut in the shape of a wedge, and nearly an inch and a half in length, and had put it in her mouth. It was supposed that whilst she thus held the piece in her mouth she was seized with piping, and that at this moment the piece of carrot had slipped into the respiratory passages. A medical practitioner first consulted thought that the foreign body had entered the oesophagus, but emetics proved unsuccessful to disengage it, and water put in the mouth could be swallowed. It was concluded, therefore, that the piece of carrot had penetrated into the air-passages, and as the symptoms of dyspncea were urgent, M. Vogelvanger decided immediately to have recourse to tracheotomy. The crico-thyroid membrane, the cricoid cartilage, and two rings of the trachea, were divided, and then with a stilet carried upwards, he sought to discover the presence and the position of the foreign body, but without success. The respiration had, however, become more free since the trachea had been opened, and it was remarked, also, that it became suspended each time that the wound was closed. Reflecting on these two circumstances, the surgeon drew the conclusion that the foreign body was in the larynx above the wound, and calling to mind the wedge-shaped form of the portion of carrot, he thought the difficulty in extracting it was attributable to the manner in which the fragment was situated in the larynx, its base being probably impacted in the cleft of this cavity, whilst its summit or thinnest edge turned downwards would be found free in the wide part of the larynx. Under this impression, having introduced a pair of dressing forceps as far as the foreign body, and placing the child's head back, he succeeded perfectly in pushing the piece of carrot with the forceps into the pharynx, from whence it passed into the oesophagus and was swallowed.—*Annales de la Société de Médecine d'Anvers: Gazette Médicale de Paris*, from *Prov. Med. and Surg. Journ.*, May 27, 1846.

*Treatment of Aphthæ by Sulphuric Acid.*—Professor LIPPICH, of Padua, has recom-

mended the following liniment in the treatment of aphthæ:—Honey 15 parts; diluted sulphuric acid, 1 part, by weight. The ulcerated surfaces should be occasionally brushed over with this liniment by means of a camel's-hair pencil. The proportion of sulphuric acid may be increased if the case is obstinate.

*Singultus.*—M. ROSTAN has recently employed with success strong pressure on the epigastrum in several cases of severe hiccup.

*Progress of the Cholera.*—The *Times* correspondent at Aden, of the date of June 3d, furnishes the following statement on the progress of this disorder.

"The cholera, which broke out so suddenly and unexpectedly on the 6th ult., has now almost disappeared. Only a few mild cases appear at intervals, from which the patients mostly recover. This happy and favourable change may be attributed to the setting in of the south-west monsoon, with its usual accompanying high winds and increased temperature, the thermometer in most houses ranging as high as  $102^{\circ}$  in the shade! We confidently look forward to the total disappearance of this dreadful epidemic in a very few days. It has been destructive in its effects; during the brief period which it has raged at Aden 400 inhabitants of the town have fallen victims—17 European soldiers, 7 Sepoys, and 30 camp followers, natives of India, have also perished. The proportion of recoveries to deaths is as one of the former to five of the latter. The shipping in the harbour, men-of-war and merchant vessels, have lost a few men from the same deadly disease. An English bark which left Aden on the 21st ult. in prosecution of her voyage to Moulmein, put back on the 23d. On anchoring it was ascertained that Captain Thomas Maxwell, the master, had died on the previous day from cholera. From accounts received from different places it appears certain that cholera is rapidly spreading through every part of Yemen, accompanied with fearful mortality. From Maculla and other ports to the eastward of Aden the same melancholy accounts have been received. It has reached Mocha, Jidda, Jambo, and almost every other port on the Arabian shore of the Red Sea. I expect to hear by the next steamer of its having reached Suez and other places in Egypt. No intelligence has yet reached

Aden of the appearance of the scourge on the Abyssinian coast. I have instituted inquiries, and from all that I can collect on the subject, I have every reason to believe that the cholera appeared, but not in so severe a form (collapse), as in 1832 and 1833, and that it travelled by the same route as it is now doing. There is therefore every reason to fear that it is rapidly approaching Europe, and that it will soon be observed on the European side of the Mediterranean."—*Lond. Med. Gaz.*, July 3, 1846.

*Composition of the Atmosphere of crowded Rooms.*—It is generally admitted that in crowded rooms a large quantity of carbonic acid is evolved, which accumulates more in the lower than in the superior part of the room. M. Lassaigne has submitted this popular belief to the test of chemical research, and finds that the carbonic acid is distributed with a remarkable degree of equality; but if it is more abundant in one region than in another, it is chiefly in the superior layers of the atmosphere.—*Med. Times*, July 25.

*A Surgeon Fined.*—A medical man in the south of France has recently been condemned to pay a fine of ten francs for refusing to give assistance to two poor persons who had been severely wounded. The ground of this person's refusal was a want of means of payment on the part of the injured persons.—*Med. Times*, July 11, 1846.

*Royal College of Surgeons.*—Wm. Lawrence, Esq., F. R. S., has been elected President; and Benj. Travers, Esq., F. R. S., and Edward Stanley, Esq., F. R. S., Vice-Presidents.

*Austrian Academy of Sciences.*—By an order in council, dated May 30th, the Emperor of Austria, on the proposition of Prince Metternich, has founded an Academy of Sciences in Vienna. This Academy is to have four sections, viz.:—Languages, history, the natural sciences, and belles lettres. The twenty-four first academicians will be appointed by the Emperor.

*Universities of Denmark.*—In the University of Kiel, in Denmark, there are at the present time 52 professors and only 200 students, or, statistically speaking, one professor to four students! This appears a low average, but we very much doubt whether,

in taking the medical schools of London and the provinces, the proportion of students to professors and teachers would not be found even lower than this.—*Lond. Med. Gaz.*, June, 1846.

*Meeting of the Scientific Congress of France.*—The fourteenth session of the Scientific Congress of France will be held at Marseilles on the 1st of September next. The managing committee have just published a report of the proposed proceedings to which they wish to call the attention of scientific men of all nations. The duration of the session will be ten days, and the labours will be divided into six sections: the natural sciences, agriculture, the medical sciences, history and archeology, literature, the fine arts, education, philology, the physical sciences, and mathematics.—*Med. Times*, June 27.

*Academy of Sciences—Prize in section of Medicine and Surgery.*—Among the prizes awarded by the French Academy of Sciences on the 11th May last, we observe the first prize in medicine and surgery was awarded to M. Amussat.

*General Council of Hospitals at Paris.*—M. ORFILA has resigned his seat in this council, in consequence of his differing in opinion from his colleagues, relative to clinical teaching.

*Ellis's Medical Formulary—Correction.*—The publishers of this work respectfully request those persons who have the seventh edition, to correct a typographical error for the "MEDICATED HYDROCYANATE OF POTASSIUM," at page 83; wherein the symbol for an ounce is used in place of that for a drachm. The following is the correct prescription, and corresponds with the proportions directed in all the previous editions of the work:

**R.**—Potassii hydrocyanici medicati, 3j.

Aquæ destillatae, Oj.

Sacchari purificati, 3iss.

*Fiat solutio.*—Dose, a tablespoonful, night and morning.

*Obituary Record.*—Died, July 21st, 1846, in his 52d year, Mr. JAMES MARSH, for many years chemical assistant to Mr. Faraday, at the Royal Military Academy, and well known as the inventor of an ingenious apparatus for the detection of minute quantities of arsenic.

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